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Fill in this information to identify your case:						
Debtor 1	Stephen L. Johnson					
Deploi 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Eastern District of Pennsylvania						
Case number (if known)	19-10245					

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

ully	additional pages, write your name and case no	aniber (ii kilowii).			
Pa	rt 1: List All of Your PRIORITY Unsecur	ed Claims			
2.	each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	reditor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's national Part 1. If more than one creditor holds a particular claims.	at claim here ar	nd show both per more than to	priority and
	(For an explanation of each type of claim, see the i	instructions for this form in the instruction booklet.)			
	r		Total claim	Priority amount	Nonpriority amount
2.1					
\vdash	A	Last 4 digits of account number	\$	\$	\$
	Priority Creditor's Name	Miles			
		When was the debt incurred?			
	Number Street				
	N	As of the date you file, the claim is: Check all that apply	<i>'</i> .		
		Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only				
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	 Claims for death or personal injury while you were intoxicated 			
	<u>-</u>	Other. Specify			
	Is the claim subject to offset?				
	□ No				
	Yes				
2.2		Last 4 digits of account number	\$	\$	\$
	Director Constitution Name	When was the debt incurred?	Ψ	Ψ	Ψ
	Priority Creditor's Name	when was the dept incurred?			
	Number Street	As of the date you file, the claim is: Check all that apply			
	Number Officer				
		Contingent			
	City State ZIP Code	Unliquidated			
	City State ZIP Code	☐ Disputed			
	Who incurred the debt? Check one. Debtor 1 only	Time of DDIODITY and a second alains			
	Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
		☐ Taxes and certain other debts you owe the government			
	At least one of the debtors and another Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
		Other. Specify			
	Is the claim subject to offset?				
	No				
	Yes				

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Debtor 1

Stephen L. Johnson

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Middle Name Last Name Case number (# known)____19-10245

Ра	rt 2: List All of Your NONPF	NORITY U	nsecured Claims			
3.	Do any creditors have nonpriority No. You have nothing to report i			1? e court with your other schedules.		
	List all of your nonpriority unsect nonpriority unsecured claim, list the included in Part 1. If more than one claims fill out the Continuation Page	creditor sepa creditor hold	arately for each claim	 For each claim listed, identify wh 	at type of claim it is. Do not	list claims already
	Bank of America					Total claim
1					0000	Total State
	N			Last 4 digits of account number	6863	\$ 20,666.94
	Nonpriority Creditor's Name P.O. Box 15019			When was the debt incurred?	2000-2019	
	Number Street					
	-			As of the date you file, the claim	io. Charle all that and b	
	Wilmington	DE	19886		is: Check all that apply.	
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated		
	Debtor 1 only					
	Debtor 2 only			Type of NONPRIORITY unsecu	ireo ciaim:	
	Debtor 1 and Debtor 2 only At least one of the debtors and anot	hau		Obligations arising out of a separ	ation agreement or divorce	
				that you did not report as priority	claims	
	Check if this claim is for a com	munity debt		Debts to pension or profit-sharing Other. Specify Credit Card Deb	plans, and other similar debts	
	is the claim subject to offset?			Other, Specify	-	
	✓ No Yes					
2	Burmans Medical Supplies			Last 4 digits of account number	9130	_{\$} 922.14
_					2017-2018	4
	Nonpriority Creditor's Name P.O. Box 15760					
	Number Street					
				As of the date you file, the claim	is: Check all that apply.	
	Pittsburgh	PA	15244	Contingent		
	City Who incurred the debt? Check one.	State	ZIP Code	☐ Unliquidated ☐ Disputed		
	Debtor 1 only			Type of NONPRIORITY unsecu	red claim:	
	Debtor 2 only			Student loans		
	Debtor 1 and Debtor 2 only At least one of the debtors and anot	hor		Obligations arising out of a separate		
				that you did not report as priority of Debts to pension or profit-sharing		
	Check if this claim is for a com	munity debt		Other. Specify Medical Service		
	Is the claim subject to offset?					
	✓ No Ves					
3	Yes Citi Bank			Last Astronomy	3162	
	·					_{\$} 7,697.96
	Nonpriority Creditor's Name P.O. Box 6004			When was the debt incurred?	2000-2019	
	Number Street					
	-			As of the date you file, the claim	is: Check all that apply.	
	Sioux Falls	SD	57117	☐ Contingent		
	Who incurred the debt? Check one.	State	ZIP Code	Unliquidated		
	Debtor 1 only			Disputed		
	Debtor 2 only			Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and Debtor 2 only			Student loans	-tion	
	At least one of the debtors and another	ner		Obligations arising out of a separathat you did not report as priority		
	Check if this claim is for a com	munity debt		Debts to pension or profit-sharing	plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify Credit Card Deb	pt	
	✓ No					
	Yes					

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Deb	First Name	Middle Name	Last Nam	e	Case number (##	(nown)	
Pa	rt 2: List All	of Your NONPRIO	RITY Un	secured Claims			
3.	Do any creditor:	s have nonpriority un	secured (claims against you	?		
	No. You have				court with your other schedules.		
	☑ Yes				, , , , , , , , , , , , , , , , , , , ,		
4 1	List all of your n	onnal culturum comme	l alalma le	. 46.0 - - - - -		and the state of t	
4. 1	nonpriority unsec	cured claim, list the cred	ı cıaıms ır ditor senai	i the aiphabetical (rately for each claim	order of the creditor who holds e . For each claim listed, identify wha	ach claim. If a creditor has	s more than one
	included in Part 1	 If more than one cred 	ditor holds	a particular claim, I	ist the other creditors in Part 3.If yo	ou have more than three no	enpriority unsecured
	claims fill out the	Continuation Page of I	Part 2.				
							Total claim
4.4	Commenity-Bo	scovs				1000	TOTAL GIAM
Nonpriority Creditor's Name					Last 4 digits of account number	1329	_{\$} 5,404.07
	P.O. Box 6596	22			When was the debt incurred?	2000-2019	
	Number Stre	et		_			
	San Antonio		TX	78265	As of the date you file, the claim	is: Check all that apply.	
	City		State	ZIP Code	☐ Contingent		
	•	ne debt? Check one.			Unliquidated		
	Debtor 1 only	acus: Olicon Ulic.			Disputed		
	Debtor 2 only				Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and	Debtor 2 only			Student loans		
	At least one of	f the debtors and another			Obligations arising out of a separathat you did not report as priority	ation agreement or divorce	
	☐ Check if this	claim is for a commu	nity debt		Debts to pension or profit-sharing	plans, and other similar debts	
			mey dobt		Other, Specify Credit Card De	bt	
	Is the claim sub	yect to onset?					
	Yes						
4.5	Commenity-Bo	scovs			Last 4 digits of account number	5896	\$ 2,529.17
						2000-2019	\$
	Nonpriority Creditor's P.O. Box 65962					<u> </u>	
	Number Stre						
					As of the date you file, the claim	is: Check all that apply.	
	San Antonio		TX	78265	☐ Contingent		
	City		State	ZIP Code	Unliquidated		
	Debtor 1 only	ne debt? Check one.			☐ Disputed		
	Debtor 2 only				Type of NONPRIORITY unsecu	red claim:	
	Debtor 1 and [Debtor 2 only			Student loans		
	At least one of	the debtors and another			Obligations arising out of a separa that you did not report as priority of	ation agreement or divorce	
	Check if this	claim is for a commun	nity debt		Debts to pension or profit-sharing		
			,		Other, Specify Credit Card Del		
	Is the claim sub	lear to allest t					
	Yes						
1.6	Lafayette Amb.	Bank			Last 4 digits of account number	5912	
	Nonpriority Creditor's					2000-2019	_{\$} 5,903.22
	P.O. Box 79040				was alle dept (IIQUITED (
	Number Stre			=======================================			
					As of the date you file, the claim	is: Check all that apply.	
	Saint Louis		MO	63179	☐ Contingent		
	City Who incurred th	e debt? Check one.	State	ZIP Code	Unliquidated		
	Debtor 1 only				Disputed		
	Debtor 2 only				Type of NONPRIORITY unsecui	red claim:	
	Debtor 1 and D				Student loans		
	☐ At least one of	the debtors and another			Obligations arising out of a separa		
	☐ Check if this	claim is for a commun	ity debt		that you did not report as priority of Debts to pension or profit-sharing		
	Is the claim sub		•		Other. Specify Credit Card Deb	pians, and other similar debts of	
	✓ No	just to offset!					

___ Yes

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Case number (if kno Middle Name Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? $oldsymbol{1}$ No. You have nothing to report in this part. Submit this form to the court with your other schedules. ✓ Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.7 Lafayette Amb. Bank Last 4 digits of account number 6851 s 4,026.18 Nonpriority Creditor's Name 2000-2019 P.O. Box 790408 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Saint Louis MO 63179 Contingent City ZIP Code Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Credit Card Debt Is the claim subject to offset? **∠** No Yes PNC \$ 12,500.00 4.8 Last 4 digits of account number 5695 When was the debt incurred? 2000-2019 Nonpriority Creditor's Name P.O. Box 1820 Number As of the date you file, the claim is: Check all that apply. Contingent 45401 Dayton OH ■ Unliquidated ZIP Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Other. Specify Credit Card Debt Is the claim subject to offset? ✓ No Yes 4.9 Last 4 digits of account number 6502 Sears \$1,589.61 2000-2019 When was the debt incurred? Nonpriority Creditor's Name P.O. Box 6286 Number Street As of the date you file, the claim is: Check all that apply. Sioux Falls SD 57117 Contingent ZIP Code Who incurred the debt? Check one. Unliquidated ☐ Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt □ Debts to pension or profit-sharing plans, and other similar debts
 ☑ Other. Specify Credit Card Debt Is the claim subject to offset? 🗾 No

__ Yes

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Debtor 1 Case number (it know Middle Name Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1d Sears Last 4 digits of account number 6089 s 354.23 Nonpriority Creditor's Name When was the debt incurred? 2000-2019 P.O. Box 6286 Number As of the date you file, the claim is: Check all that apply. Sioux Falls SD 57117 ☐ Contingent ZIP Code State Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other, Specify Credit Card Debt Is the claim subject to offset? ✓ No Yes Last 4 digits of account number When was the debt incurred? Nonpriority Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated City
Who incurred the debt? Check one. State ZIP Code Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ☐ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Other, Specify Is the claim subject to offset? No Yes Last 4 digits of account number When was the debt incurred? Nonpriority Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. State ZIP Code ■ Unliquidated Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only ☐ Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify Is the claim subject to offset?

___ No Yes Case 19-10245-ref

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Debtor 1

Stephen L. Johnson
First Name Middle Name

Last Name

Case number (if known) 19-10245

Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	s0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$
	6e. Total . Add lines 6a through 6d.	6e.	\$0.00
			Total claim
Total claims	6f. Student loans	6f.	\$ 0.00
from Part 2	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$61,593.52
	6j. Total. Add lines 6f through 6i.	6j.	\$61,593.52